## DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 445945 RECEIPT DATE: 12 / 20 / 99 IA NUMBER: FCT/ EF98 / 03734 IA FILING DATE: 06 / 18 / 98 FAMILY NAME: DELAY WAIVED (Y/N): WEH Y. GIVEN NAME: DEMAND RECEIVED (Y/N): ERWIN PRIORITY CLAIMED (Y/N): Υ PRIORITY DATE: 06 / 18 / /97 NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): ATTORNEY DOCKET NUMBER: KKFI34.001AP COUNTRY: EF:X CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: **TELEPHONE** FAX

NAME: KNOBBE MARTENS OLSON & BEAR

STREET: 620 NEWPORT CENTER DRIVE

SIXTEENTH FLOOR

CITY: NEWPORT BEACH

STATE/COUNTRY: CA ZIP: 92660

EMAIL:

APPLICATION TITLES:

FILLING CONNECTION FOR A GAS BOTTLE VALVE

TAB TO LAST FOSITION, PUSH SEND